



Patent

Attorney's Docket No. 18636X
In re the Application of: Schlomo Ovadia
Application No.: 10/804,487
Filed: March 18, 2004
For: METHOD AND ARCHITECTURE FOR SECURITY KEY GENERATION AND
DISTRIBUTION WITHIN OPTICAL SWITCHED NETWORKS
(title)

Mail Stop Amendment
Commissioner For Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

SIR/MADAM: Transmitted herewith is a response and amendment, Information Disclosure Statement, and Form 1449 for the above application.

Applicant claims small entity status. See 37 CFR 1.27.

XX No additional claims fee is required.

OTHER -

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	43	Minus	44	0
Indep. Claims	4	Minus	*** 4	0
<input type="checkbox"/>	First Presentation of Multiple Dependent Claim(s)			

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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SMALL ENTITY

Rate	Additional Fee
X25	\$
X100	\$
+180	\$
Total Add. Fee	\$

OTHER THAN A
SMALL ENTITY

Rate	Additional Fee
X50	\$ 0
X200	\$ 0
+360	\$
Total Add. Fee	\$ 0

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Date

_____ A check in the amount of \$_____ is attached for presentation of additional claim(s).
_____ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
37 C.F.R. § 1.136(a).

_____ A check for \$_____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of \$_____.
A duplicate copy of this sheet is enclosed.

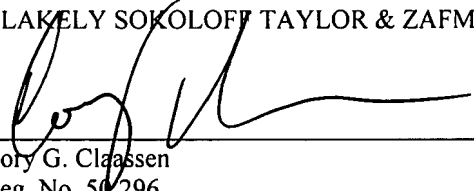
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Patent and Trademark Office is hereby authorized to charge payment of the following fees associated
with this communication or credit any overpayment to Deposit Account No. 02-2666 **(a duplicate copy
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X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.

X Any extension or petition fees under 37 C.F.R. § 1.17.

Date: Oct. 10, 2007

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP



Cory G. Claassen
Reg. No. 50,296
(206) 292-8600

1279 Oakmead Parkway
Sunnyvale, CA 94085-4040